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	ENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Koninklijke Philips Electronics N	N.V.
Application No./Patent No.: Concurrently	Filed/Issue Date: Concurrently
Entitled: A PASSIVE MATRIX DISPLAY WITH BISTAB	LE ELECTRO-WETTING CELLS
Koninklijke Philips Electronics N.V. (Name of Assignee)	, a <u>corporation</u> (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
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The undersigned (whose title is supplied below) is aut	
Date	Daniel J. Hiotrowski, Reg. 42,079 Typed by printed name
(914) 333-9624	Types of printed name
Telephone number	Signature
	Corporate Counsel
	Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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KONINKLIJKE PHILIPS ELECTRONICS N.V.						
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5621 BA Eindhoven, The Netherlands						
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of						
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee.						
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SIGNATURE of Assignee of Record The dividual whose signaring and title is supplied below is authorized to act on behalf of the assignee						
Signature	KLK	16. HL	un		Date 14 Janu	uary 2005
Name Mi	chael E.	Marion			Telephone (914)	333-9637
Title Au	thorized	Representat	ive			

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Rec'd PCT/PT0 154063200

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL030166 US

As a below named inventor, I h	ereby declare that:					
My residence, post office address and citizenship are as stated next to my name.						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: the specification of which (check only one item below):						
is attached hereto.	is attached hereto.					
was filed as United States a	☐ was filed as United States application					
Serial No						
on ———						
and was amended						
on						
_						
was filed as PCT internation	al application					
Number PCT/IB2004/050119						
on <u>18 February 2004</u>						
and was amonded under DCT	Artiala 10					
and was amended under PCT Article 19						
on	A CONTRACTOR OF THE CONTRACTOR		(if applicable).			
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.						
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).						
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:						
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:						
COUNTRY	APPLICATION NUMBER	DATE OF FILING	PRIORITY			
COUNTRY	AFFEIGATION NOIMBER	DAY, MONTH, YEAR	CLAIMED UNDER 35 USC 119			
Europe	03100460.9	26 February 2003	YES			
		2, 22.22				
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Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)				Attorneys Docket Number PHNL030166 US		
POW all bus	ER OF ATTORNE iness in the Patent a	Y: As a named inventor and Trademark Office co	I hereby appoint onnected therewith	n. (List name and registration nu	r agent(s) to pro imber)	secute this application and transact
Michael F. Marion, Reg. No. 32 266/			Direct Telepho (name and tele (914)332-02	ephone number) 222		
	FULL NAME OF INVENTOR	FAMILY NAME IJZERMAN		FIRST GIVEN NAME Willem		SECOND GIVEN NAME Lubertus
201	RESIDENCE & CITIZENSHIP	Eindhoven N		STATE OR FOREIGN COUNTRY The Netherlands		COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6		CITY 5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY The Netherlands
FULL NAME OF INVENTOR		VISSENBERG VISSENBERG		FIRST GIVEN NAME Michel		second given name C <u>ornelis Jose</u> phus Marie
202	RESIDENCE & CITIZENSHIP	Eindhoven NCX		STATE OR FOREIGN COUNTRY The Netherlands		COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6		CITY 5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME KRIJN		FIRST GIVEN NAME Marcellinus		second given name Petrus-Carolus Michael
203	RESIDENCE & CITIZENSHIP	Eindhoven NLX		STATE OR FOREIGN COUNTRY The Netherlands		COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6		5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME DE ZWART	N	FIRST GIVEN NAME Siebe		SECOND GIVEN NAME Tjerk
204	RESIDENCE & CITIZENSHIP	Eindhoven \	LX	STATE OR FOREIGN COUN The Netherlands	ITRY	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	Prof. Holstlaa		5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY The Netherlands
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SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNAT	URE OF INVENTOR 203	
DATE 24 Sontombor 2004			DATE 24 Sent	ember 2004	DATE	// Sentember 2004

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

SIGNATURE OF INVENTOR 204

24 September 2004

DATE